

L14000155733

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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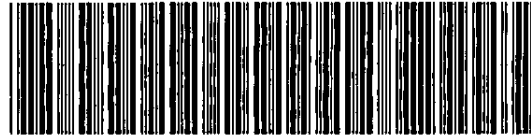
(Business Entity Name)

(Document Number)

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14 SEP 30 AM 7:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: REGISTRATION SECTION DIVISION OF CORPORATIONS

SUBJECT:

1563 JONESBORO HOLDINGS, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

STEPHEN HUNTER JOHNSON, ESQ.
LYDECKER DIAZ
1221 BRICKELL AVE, 19TH FLOOR
MIAMI, FL 33131
shj@lydeckerdiaz.com

For further information concerning this matter, please call:

STEPHEN HUNTER JOHNSON, ESQ.
at
(305) 415-6354

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR LIMITED LIABILITY COMPANY

ARTICLE I – NAME

The name of the Limited Liability Company shall be:

1563 JONESBORO HOLDINGS, LLC

ARTICLE II – PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

The complete mailing address and street address of the principal office of the Limited Liability Company is:

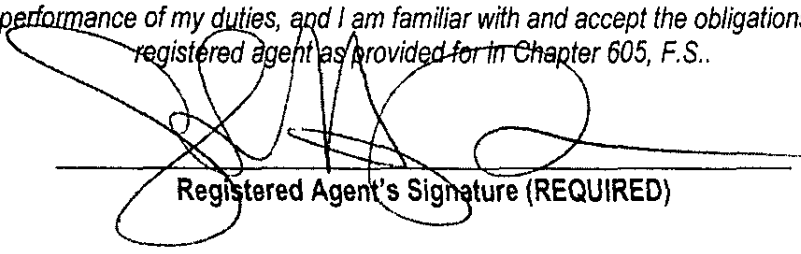
**835 MULLRANY DR.
COPPELL, TX 75019**

ARTICLE III –REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are:

**STEPHEN HUNTER JOHNSON, ESQ.
LYDECKER DIAZ
1221 BRICKELL AVE, 19TH FLOOR
MIAMI, FL 33131**

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV – MANAGEMENT AND AUTHORIZED MEMBERS

The name and address of each person authorized to manage and control the Limited Liability Company:

Title: (*AMBR* = Authorized Member / *MGR* = Manager)

Name and Address:

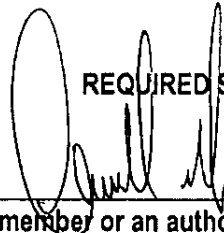
MANAGER & AUTHORIZED MEMBER

BLACKACRE, LLC
835 MULLRANY DR.
COPPELL, TX 75019

ARTICLE V – EFFECTIVE DATE

The Effective Date of these Articles of Organization shall be:

SEPTEMBER 24 2014

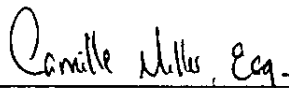


REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)



Typed or printed name of signee

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TALLAHASSEE, FLORIDA